APPENDIX 3

PERMIT-REQUIRED CONFINED SPACE (PRCS) ENTRY PERMIT

Date of Entry:	Permit Number:	
(Permit good for above day only)		
Name and Location of Space:		
Type of Space:		
(Tank, Sewer, Boiler, Pit, etc.)		
Operation(s) to be Conducted:		
Hazards to be Controlled or Eliminated:		
	Area Management	
Safety Equipment Required:		
Self-Contained Breathing Apparatus	Supplied Breathing Air	
Forced Ventilation Required Prior to Entry	Fire Extinguisher Near Space (type)	
Forced Ventilation Required During Occupation	Other	
Respirator (type)	Other	
Safety Glasses	Other	
Gloves (type)	Other	
Name(s) of Workers Entering Space and Job D	Outies:	
Name(s) of Attendant(s):		
Communication: Voice Visual Radio	n ☐ Other (Specify) ☐	

Safety Precautions Required:	How Will Re	scue/Aid be Summoned?
Weld/Burn Permit		
Lockout/Tagout		
Other (Specify)		
Monitoring Required:	Rescue Equ	uipment:
Oxygen Monitoring Prior to Entry		Safety Harness w/D-ring, Lanyard
Comb Gas Monitoring Prior to Entry		Winch, Lifting Equipment
Oxygen Monitoring During Occupation		Other (Specify)
Comb. Gas Monitoring During Occupation		
Monitoring Prior to E	intry	
Monitoring During O	ccupation	
Other (Specify)		
Oxygen Monitoring Level Prior to Entry% Instrument%		
Combustible Gas Monitoring Level Prior to Entry		
*Name and Signature of Trained Monitor:Print Name	e S	/ Signature
This permit and the attached emergency response properties of contents discussed with workers. All workers assign space training.		
Entry into this space is authorized by:Print Name		/ Signature of Supervisor

This permit is to be posted near the entrance to the confined space during occupation.

^{*} The results of periodic test performed during the course of entry shall be documented on a separate worksheet and attached to this permit. List the name of monitor, time, and results of test.